

07/08/2004 16:03 2123195101

FRISHAF HOLTZ GOODMAN JUL 08 2004

PAGE 01/01

PTO/SB/122 (10-00)

Please type a plus sign (+) inside this box → (+)

Approved for use through 10/31/2002. OMB 0851-0035
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	09/754,740
	Filing Date	January 04, 2001
	First Named Inventor	Noboru OGINO
	Group Art Unit	2622
	Examiner Name	SAFAIPOUR, HOUSHANG
	Attorney Docket Number	00936/LH

Please change the Correspondence Address for the above-identified application to:

☒ Customer Number [01933] →
Type Customer Number here

01933

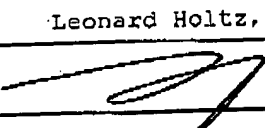
<input checked="" type="checkbox"/> Firm or Individual Name	FRISHAUF, HOLTZ, GOODMAN & CHICK, P.C.				
Address	767 Third Avenue - 25th Floor				
Address					
City	New York	State	NY	ZIP	10017-2023
Country	U.S.A.				
Telephone	(212) 319-4900	Fax	(212) 319-5101		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- ☐ Applicant/Inventor.
- ☐ Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or Agent of record.

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed Name	Leonard Holtz, Registration No. 22,974
Signature	
Date	July 8, 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

<input type="checkbox"/> Total of _____ forms are submitted.
--

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: At Commissioner for Patents, Washington, DC 20231.